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TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

		Application Number	10/020,461
		Filing Date	December 14, 2001
		First Named Inventor	M'Saad, Hichem
		Art Unit	1731
		Examiner Name	Hoffmann, John M.
Total Number of Pages in This Submission	1	Attorney Docket Number	A6123/T43700

ENCLOSURES (Check all that apply)

<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to TC		
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences		
<input checked="" type="checkbox"/> Amendment/Reply	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)		
<input checked="" type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information		
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation	<input type="checkbox"/> Status Letter		
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Change of Correspondence Address	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):		
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	<input type="checkbox"/> Return Postcard		
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Request for Refund			
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> CD, Number of CD(s) _____			
<input type="checkbox"/> Reply to Missing Parts/ Incomplete Application	<input type="checkbox"/> Landscape Table on CD			
<input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53				
<table border="1"> <tr> <td>Remarks</td> <td>If any extensions of time are necessary, such are hereby petitioned. The Commissioner is authorized to charge any additional fees to Deposit Account 20-1430.</td> </tr> </table>			Remarks	If any extensions of time are necessary, such are hereby petitioned. The Commissioner is authorized to charge any additional fees to Deposit Account 20-1430.
Remarks	If any extensions of time are necessary, such are hereby petitioned. The Commissioner is authorized to charge any additional fees to Deposit Account 20-1430.			

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	Townsend and Townsend and Crew LLP		
Signature			
Printed name	Milan M. Vinnola		
Date	May 16, 2005	Reg. No.	45,979

CERTIFICATE OF TRANSMISSION/MAILING

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Aurora Lowell

PATENT
Attorney Docket No.: A6123/T43700
AMAT No.: AMAT
006123/USA/DSM/HDP/CVD/JW
TTC No.: 016301-043700US

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:

HICHEM M'SAAD et al.

Application No.: 10/020,461

Filed: December 14, 2001

For: METHOD OF MANUFACTURING
AN OPTICAL CORE

Customer No.:

Confirmation No. 9343

Examiner: Hoffmann, John M.

Technology Center/Art Unit: 1731

**AMENDMENT UNDER 37 CFR 1.116
EXPEDITED PROCEDURE EXAMINING
GROUP 1731**

Mail Stop AF

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

In response to the Final Office Action mailed February 14, 2005 on the above-referenced application, please enter the following amendments and remarks:

Amendments to the Claims are reflected in the listing of claims which begins on page 2 of this paper.

Remarks/Arguments begin on page 9 of this paper.